

Guidance for Fiscal Year 2000 Supplemental Funds for
Epidemiology and Laboratory Capacity for Infectious Diseases
and
Emerging Infections Program
West Nile Virus Surveillance and Epidemiologic Projects
[Announcement ELC/EIP Supplement - B]

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2000 funds for competitive supplemental awards to eligible grantees of the Epidemiology and Laboratory Capacity (ELC) for Infectious Diseases and Emerging Infections Program (EIP) cooperative agreement programs. These programs address the "Healthy People 2000" priority area Immunization and Infectious Diseases.

The purpose of these FY 2000 supplemental funds is to assist grantees in planning and developing more effective arbovirus surveillance and response programs focusing on the West Nile Virus and to build epidemiological and laboratory capacity for addressing West Nile (WN) and other arbovirus infections in the eastern United States (U.S.).

The WN fever outbreak in the northeastern U.S. in the summer and fall of 1999, represented the first incursion of this exotic arbovirus into the U.S. As of December 9, 1999, 59 confirmed or probable human cases of WN virus infection had been identified, including seven deaths.

The basic transmission cycle of WN fever involves mosquitoes feeding on birds infected with the WN virus. Infected mosquitoes then transmit WN virus to humans and animals. This virus outbreak occurred during the peak southerly bird migration, and the effect this migration had on the spread of the virus beyond the outbreak epicenter is unknown. Additional information may be found in 3 MMWR articles (attached).

B. Eligible Applicants

Eligibility for these competitive supplemental awards is limited to the 16 state and local health departments that are current grantees under the CDC ELC or EIP cooperative agreement programs that are in the geographic area at risk of experiencing transmission of West Nile (WN) virus in the Spring of 2000. Thus, the following 16 health departments are eligible to apply for these supplemental funds:

ELCs: Massachusetts, Rhode Island, Connecticut, New
York State, New York City, Pennsylvania, New

Jersey, Virginia, North Carolina, Georgia, Florida, Alabama, Mississippi, Louisiana and Texas.

EIPs: Maryland

No other applications will be accepted.

Eligibility is limited to the above state health departments, because the outbreak epicenter was in the New York City area with infected birds and/or mosquitoes also identified in Long Island, Connecticut, and eastern New Jersey. As the major bird migration routes from this area run south along the Atlantic and Gulf Coasts, this virus poses a significant threat to humans, wildlife, and domestic animals in coastal states that are either adjacent to or south of the New York City/Connecticut/New Jersey area.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

C. Availability of Funds

Approximately \$2,490,000 is available in FY 2000 to fund up to 16 awards. It is expected that the average award will be

\$150,000, ranging from \$50,000 to \$250,000. It is expected that these supplemental awards will begin on or about April 1, 2000 and be made for a period not exceeding the applicant's current ELC cooperative agreement project period. Funding estimates may change.

Continuation awards in future years for this supplemental activity within the approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

D. Program Requirements

In conducting activities to achieve the purpose of this program, the recipient will be responsible for the activities under Recipient Activities, and CDC will be responsible for conducting activities under CDC Activities:

Recipient Activities

1. Conduct surveillance and epidemiologic activities to identify and monitor WN virus activity.
2. Develop protocol(s) to integrate the following WN and other arbovirus surveillance and response activities into existing public health programs, as appropriate for the particular setting. These activities may include, but are not limited to:

- a. Assessing risk factors for WN and other arbovirus infections among human populations in the catchment area;
 - b. conducting active, laboratory-based surveillance to detect WN and other arbovirus activity in mosquito vectors, vertebrate reservoir hosts and domestic animals prior to human infection, in areas where there is risk for infection with these viruses;
 - c. identifying and controlling potential mosquito vectors of WN and other arboviruses;
 - e. providing education and public outreach to reduce human exposure to WN and other arboviruses.
3. Develop and implement a training program for local and state health department staff on laboratory diagnosis, surveillance, prevention, and control of WN and other arbovirus infections.
4. Implement protocol(s) to integrate mosquito surveillance, control and abatement services into appropriate existing public health programs.
5. Implement protocol(s) for laboratory procedures for the diagnosis of WN virus and other arboviruses, including:
 - a. Eastern equine encephalitis

- b. St. Louis encephalitis
 - c. California serogroup viruses
 - d. Dengue
6. Develop and implement a monitoring and evaluation system to assess the feasibility, impact, and effectiveness of WN virus prevention services.
 7. Conduct data analysis and interpret and disseminate results.
 8. If a proposed project involves research on human participants, ensure appropriate Institutional Review Board (IRB) review.

CDC Activities

1. Provide overall multi-site project coordination.
2. Provide technical support in the design, implementation, and evaluation of program activities, if requested.
3. Assist in data analysis and dissemination of project findings.
4. If during the project period research involving human subjects is conducted and CDC scientists will be co-investigators in that research, assist in the development of a research protocol for IRB review by all institutions participating in the research project. The CDC IRB will review and approve the protocol

initially and on at least an annual basis until the research project is completed.

E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. Applications will be evaluated on the criteria listed in Section G., below, so it is important that narratives follow the criteria in the order presented.

The narratives should be no more than 10 single-spaced pages (not including appendices for items such as curricula vitae, letters of support, and other similar supporting information). **Do NOT solicit or submit letters of support from CDC personnel.**

A budget justification is required for all budget items and must be submitted with Standard Form 424A, "Budget Information, as part of PHS 5161-1 (Revised 9/92). The budget should include the total funds requested for the project, with separate budgets for each component, i.e., surveillance and epidemiologic studies; laboratory capacity; and ecologic studies/prevention and control. If requesting funds for any contractual activities, provide the following

information for each contract or subaward: (1) Name of proposed contractor, (2) breakdown and justification for estimated costs, (3) description and scope of activities to be performed by contractor, (4) period of performance, and (5) method of contractor selection (e.g., sole-source or competitive solicitation).

All pages of the applications must be single-spaced, printed on one side, with one inch margins and a font size of 11 or larger on white 8.5" x 11" paper.

All pages must be clearly numbered, and a complete Table of Contents for the application and its appendices must be included.

The required original application and two full copies must be submitted unstapled and unbound. Do not submit any bound or stapled materials (e.g., pamphlets, booklets, etc.) in the appendices. The entire application must be able to run through an automatic document feed copier.

F. Submission and Deadline

Application

Submit the original and two copies of PHS 5161-1 (OMB Number 0937-0189) which is in the application kit. On or before

February 1, 2000, submit the application to:

Oppie Byrd, Grants Management Specialist

Grants Management Branch

Procurement and Grants Office

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Centers for Disease Control and Prevention (CDC)

2920 Brandywine Road, Room 3000

Atlanta, Georgia 30341-4146

If your application does not arrive in time for scheduled review date, it will not be considered in the current competition unless you can provide proof that you mailed it on or before the deadline (i.e., receipt from U.S. Postal Service or a commercial carrier; private metered postmarks are not acceptable).

G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC:

1. Background and need **(10 points)**

The applicant demonstrates a clear understanding of the subject area and of the purpose and objectives of this supplement.

2. Capacity **(45 points)**

- a. The applicant describes adequate resources and facilities (both technical and administrative) for conducting the project, including plans for integrating WN and other arbovirus program personnel and services into the existing organizational structures state departments of health.
- b. The applicant describes adequate resources and facilities (both technical and administrative) for conducting the project, including plans for integrating arboviral disease program personnel and services into the existing organizational structures.
- c. The applicant documents that professional personnel involved in the project are qualified and have past experience and achievements in activities related to the project.

3. Objectives and Technical Approach **(45 points)**

- a. The applicant describes objectives of the proposed project which are 1) consistent with the purpose and goals of this cooperative agreement program, 2) measurable and time-phased, and 3) consistent with published CDC guidelines for surveillance, prevention and control of arboviral encephalidities (Guidelines for Arbovirus Surveillance in the United States, April 1993 - available via the CDC Website at <http://www.cdc.gov/ncidod/dvbid/arbor/arboquid.htm>).
- b. The applicant presents an operational plan for initiating and conducting the project, which clearly and appropriately addresses all Recipient Activities in the application and clearly identifies specific assigned responsibilities of all key professional personnel.
- c. Applicant provides a detailed and adequate plan for evaluating progress toward achieving project process and outcome objectives.

4. Budget (**not scored**)

The extent to which the proposed budget is reasonable, clearly justified, and consistent with the intended use of the cooperative agreement funds.

5. Human Subjects (**not scored**)

If proposed activities constitute human subjects research, does the application adequately address the requirements of Title 45 CFR Part 46 for the protection of human subjects?

____YES ____No Comments:_____

H. Other Requirements

Technical Reporting Requirements:

Technical reporting requirements are the same as those under grantee's existing ELC or EIP cooperative agreement award.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I.

AR98-1	Human Subjects Requirements
AR98-2	Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research
AR98-7	Executive Order 12372 Review
AR98-10	Smoke-Free Workplace Requirements
AR98-11	Healthy People 2000
AR98-12	Lobbying Restrictions

**I. Authority and Catalog of Federal Domestic Assistance
Number**

This program is authorized under the Public Health Service Act Sections 301(a)[42 U.S.C. 241(a)], 317(k)(1)[42 U.S.C. 247b(k)(1)], and 317(k)(2)[42 U.S.C. 247b(k)(2)], as amended. The Catalog of Federal Domestic Assistance number is 93.283.

J. Where to Obtain Additional Information

Business management technical assistance for the ELC cooperative agreement program may be obtained from:

Oppie Byrd, Grants Management Specialist
Grants Management Branch
Procurement and Grants Office
Centers for Disease Control and Prevention (CDC)
2920 Brandywine Road, Room 3000
Atlanta, Georgia 30341-4146
Telephone: (770) 488-2748
E-mail Address: **oxb3@cdc.gov**

Business management technical assistance for the EIP cooperative agreement program may be obtained from:

Andrea Wooddall, Grants Management Specialist
Grants Management Branch
Procurement and Grants Office
Centers for Disease Control and Prevention (CDC)
2920 Brandywine Road, Room 3000
Atlanta, Georgia 30341-4146
Telephone: (770) 488-2749
E-mail Address: **ayw3@cdc.gov**

Programmatic technical assistance specifically for this supplemental request may be obtained from:

John T. Roehrig, Ph.D., Arbovirus Diseases Branch
Division of Vector-Borne Infectious Diseases
National Center for Infectious Diseases
Centers for Disease Control and Prevention (CDC)
P. O. Box 2087 (Mailstop P02)
Fort Collins, CO 80522
Telephone: (970) 221-6465; Fax: (970) 221-6476
E-mail Address: jtr1@cdc.gov

Programmatic technical assistance regarding the ELC program overall may be obtained from:

Deborah Deppe, M.P.A., Office of the Director
National Center for Infectious Diseases
Centers for Disease Control and Prevention (CDC),
Mailstop C12, 1600 Clifton Road, N.E.
Atlanta, Georgia 30333
Telephone: (404) 639-4668
E-mail Address: dad1@cdc.gov

Programmatic technical assistance regarding the EIP program overall may be obtained from:

Robert W. Pinner, M.D., Office of Surveillance
National Center for Infectious Diseases
Centers for Disease Control and Prevention (CDC),
Mailstop D59, 1600 Clifton Road, N.E.
Atlanta, Georgia 30333
Telephone: (404) 371-5454
E-mail Address: rwpl@cdc.gov

ADDITIONAL ATTACHMENTS

MMWR, Outbreak of West Nile-Like Viral Encephalitis -- New York, 1999. October 1, 1999 / 48(38);845-9.

MMWR, Update: West Nile-Like Viral Encephalitis -- New York, 1999. October 8, 1999 / 48(39);890-2.

MMWR, Update: West Nile Virus Encephalitis - New York, 1999. October 22, 1999 / 48(41);944-946, 955.